

Application Data Sheet

Application Information

| | |
|----------------------------------|--|
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Group Art Unit:: | 1616 |
| CD-ROM or CD-R?:: | None |
| Sequence submission?:: | None |
| Computer Readable Form (CRF)?:: | No |
| Title:: | TETRACYCLINE COMPOUNDS HAVING TARGET THERAPEUTIC ACTIVITIES |
| Attorney Docket Number:: | PAZ-147CP2 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Small Entity?:: | No |
| Petition included?:: | No |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

| | |
|---|-------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | US |
| Status:: | Full Capacity |
| Given Name:: | Stuart |
| Middle Name:: | B. |
| Family Name:: | Levy |
| City of Residence:: | Boston |
| State or Province of Residence:: | MA |
| Country of Residence:: | US |
| Street of mailing address:: | 144 Warren Avenue |
| City of mailing address:: | Boston |
| State or Province of mailing address:: | MA |
| Postal or Zip Code of mailing address:: | 02116 |

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Family Name:: Draper
City of Residence:: Plaistow
State or Province of Residence:: NH
Country of Residence:: US
Street of mailing address:: 27 Partridge Lane
City of mailing address:: Plaistow
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03865

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name:: L.
Family Name:: Nelson
City of Residence:: Norfolk
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 47 Barnstable Road
City of mailing address:: Norfolk
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02056

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United Kingdom
Status:: Full Capacity
Given Name:: Graham

Family Name:: Jones
City of Residence:: Needham
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 55 Fay Lane
City of mailing address:: Needham
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02494

Correspondence Information

Correspondence Customer Number:: 00959

Representative Information

Representative Customer Number:: 00959

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|---|----------------------|----------------------|
| This Application | An application claiming the benefit under 35 USC 119(e) | 60/441141 | 01/16/03 |
| This Application | Continuation-in-part of | 10/196010 | 07/15/02 |
| 10/196010 | An application claiming the benefit under 35 USC 119(e) | 60/305546 | 07/13/01 |
| 10/196010 | An application claiming the benefit under 35 USC 119(e) | 60/395741 | 07/12/02 |

Assignee Information

Assignee name:: Paratek Pharmaceuticals, Inc.
Street of mailing address:: 75 Kneeland Street
City of mailing address:: Boston

State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02111